



U.S. Agency for  
International  
Development

Bureau for  
Global Health

# COUNTRY PROFILE

HIV/AIDS

## CAMBODIA

As one of the poorest nations in the region, Cambodia faces the most serious HIV/AIDS epidemic in Southeast Asia. Although initially concentrated in at-risk segments of the population, the epidemic currently affects men, women, and children in all of the country's 24 provinces and municipalities. Dynamic population flow is a major driving force behind the country's epidemic, which is spread almost entirely by sexual transmission. The highest rates of infection are in the southeast and central provinces, and along the Thai border.

Estimated Number of Adults and Children Living with HIV/AIDS (end 2001)	170,000
Total Population (2001)	13,441,000
Adult HIV Prevalence (end 2001)	2.7%
HIV-1 Seroprevalence in Urban Areas	
Population most at risk (i.e., sex workers and clients, STI patients, or others with known risk factors)	26.3%
Population not at risk (i.e., pregnant women, blood donors, or others with no known risk factors)	2.7%

Sources: UNAIDS, U.S. Census Bureau

There are hopeful signs, however. Statistics released in 2002 by the Ministry of Health reveal the spread of HIV/AIDS in Cambodia is slowing. These figures indicate there are 157,500 HIV-infected adults (aged 15–49) nationwide, yielding a 2.6 percent infection rate among that age group. The latest UNAIDS estimates indicate that by the end of 2001, 170,000 people in Cambodia were living with HIV/AIDS, with an adult HIV prevalence of 2.7 percent. These numbers represent a significant decline from 1997 Ministry of Health estimates, which put adult HIV infections at 210,000 (3.9 percent of all adults).

Specific factors contributing to the spread of HIV/AIDS in Cambodia include extensive and frequent solicitation of commercial sex workers by Cambodian men, coupled with high levels of sexually transmitted infections. According to the Ministry of Health, in 2001, HIV prevalence among direct female sex workers was 28.8 percent, down from 42.6 percent in 1998.



Map of Cambodia: PCL Map Collection, University of Texas

The HIV prevalence rate among indirect female sex workers in 2001 was 14.8 percent, down from 19.2 percent in 1998. Surveys conducted in 2001 indicate consistent male condom use with female sex workers was between 78.8 percent and 86.7 percent, up from between 53 percent and 63 percent in 1998. Consistent male condom use with regular or nonsex-worker partners is between 26.4 percent and 33.4 percent. Injection drug use is thought to be in its early stages in Cambodia, with very little available data.

The epidemic is now also seriously affecting the lives of Cambodian children. New UNAIDS estimates suggest that 12,000 children under the age of 15 were living with HIV/AIDS and as many as 55,000 children had lost one or both parents to HIV/AIDS by the end of 2001.

1300 Pennsylvania  
Avenue NW  
Washington, DC  
20523-3600

[www.usaid.gov](http://www.usaid.gov)

## NATIONAL RESPONSE

In its effort to address HIV/AIDS, Cambodia faces the challenge of overcoming socioeconomic, political, and psychological effects of decades of genocide and civil war and the need to rebuild its crumbled health infrastructure. Despite these barriers, there is a high level of commitment to HIV/AIDS in Cambodia and many elements of an effective response to the epidemic are in place, including:

- A good sentinel surveillance system;
- Behavioral research;
- Blood safety programs;
- Prevention interventions targeted toward “core groups” including sex workers, the military, police, and fishermen;
- Nongovernmental organization collaboration; and
- Care and support for people living with HIV/AIDS and orphans and vulnerable children.

A National Policy and Priority Strategy for HIV/AIDS Prevention and Control (1999–2004) was designed to create a social environment conducive to prevention and control of HIV/AIDS. Important elements of the Strategy support activities aimed at curbing the epidemic and strengthening the capacity of the individual, family, community, and the country’s economic system. In 1998, the Ministry of Health established the National Center of HIV/AIDS, Dermatology, and Sexually Transmitted Diseases to oversee the national response to HIV/AIDS, as well as provide technical support to other government agencies and national partners. In January 1999, the National AIDS Authority was established to strengthen the multisectoral response to the epidemic and ensure all ministries and provinces integrate HIV/AIDS initiatives into their policies.

The Government of Cambodia develops and implements HIV/AIDS prevention strategies in close collaboration with UNAIDS and other partners. Priorities for action include:

- Establishing a multisectoral response;
- Continuing the 100% Condom Use Program;
- Improving sexually transmitted infection prevention and treatment;
- Preventing mother-to-child transmission;
- Implementing HIV/AIDS and sexually transmitted infection school-based education and outreach programs among “core groups;”
- Implementing HIV/AIDS and sexually transmitted infection community-based prevention programs;
- Integrating HIV and TB strategies; and
- Providing care and support to people living with HIV/AIDS and orphans and vulnerable children.

Largely due to the prohibitive price and infrastructure deficiencies, the Government of Cambodia has no current plans to distribute antiretroviral therapies throughout the country. Discussion of how to begin doing so, however, has begun and proposals for funding have been submitted to the Global Fund and other donors to enable people living with HIV/AIDS to gain access to antiretroviral therapy. At the closing of the Second National HIV/AIDS Conference in Cambodia in 2002, His Honorable Prime Minister Hun Sen announced that all people living with HIV/AIDS in Cambodia should have access to antiretroviral therapy.

Currently, some small-scale nongovernmental organization projects are providing antiretroviral therapies. Cambodian nongovernmental organizations and community-based organizations, including people who live with HIV/AIDS organizations, have been instrumental in delivering HIV/AIDS prevention and care services since the beginning of the epidemic. Generic antiretrovirals are available from Thailand and India, and are becoming more available in the private sector, which is largely unregulated. This availability could eventually cause dangerous drug resistance, making the introduction of regulated antiretroviral services essential in the very near future.

## USAID SUPPORT

In FY 2001, USAID allocated \$9.5 million for HIV/AIDS activities in the country, up from \$2 million in FY 2000. In FY 2002, the amount was increased to \$12 million. USAID/Cambodia has focused its prevention and control efforts on

at-risk populations and on individuals, such as police officers and military personnel, who form bridges between at-risk groups and the general population. The Mission's primary aims include:

- Informing policymakers about the HIV/AIDS epidemic;
- Reducing at-risk behaviors in target areas; and
- Piloting and replicating sexually transmitted infection and health care services for at-risk populations.

As a result of a comprehensive assessment in 2001, USAID will begin to scale up and expand successful HIV-prevention interventions and strengthen health systems to meet reproductive, family health, and infectious disease needs of Cambodia's largely rural population. This combined approach will replace separate programs in HIV/AIDS and reproductive and child health. The new strategy will enable USAID/Cambodia to address the growing needs of the general population, which is more and more affected by HIV/AIDS, and to expand its efforts to provide care and support to people living with HIV/AIDS.

### ***Behavior Change Communication***

Through Family Health International's IMPACT project, USAID implemented and continues to run a highly effective information, communication, and education program to raise awareness among the general population of the dangers of HIV/AIDS and sexually transmitted infections.

### ***Children Affected by AIDS***

Activities targeting children affected by and infected with HIV/AIDS were initiated during 2000. Working with USAID partners, 14 nongovernmental organizations throughout Cambodia redesigned their projects to include support for orphans and vulnerable children and now serve 200 children. Family Health International and the International HIV/AIDS Alliance initiated new activities to address the needs of children affected by HIV/AIDS, including orphans. Family Health International provides education and care services to sexually active street children, and educates their families on ways to prevent HIV transmission.

### ***Condoms***

Since 1993, Population Services International has played an important role in implementing a nationwide condom distribution program. Through its social marketing program, more than 56.3 million condoms have been sold, with sales increasing every year. Currently, condoms are reported to be available in more than 90 percent of commercial sex establishments.

### ***Monitoring and Evaluation***

Largely as a result of USAID assistance, Cambodia has one of the most advanced HIV surveillance systems in Asia and already adheres to many second-generation surveillance principles.

### ***Nongovernmental Organization Strengthening***

The International HIV/AIDS Alliance supported the establishment of the Khmer HIV/AIDS Nongovernmental Organization Alliance, which strengthens the work of organizations involved in HIV/AIDS efforts, encourages new groups to become more involved, and encourages cooperation to identify funding and technical support. The Alliance is also building the capacity of local organizations to provide home care and support teams for people living with HIV/AIDS.

### ***Operations Research***

The Population Council's Horizons Program conducts research on the effect of prevention behaviors; provision of home care to persons living with HIV/AIDS; and community mobilization approaches to decreasing HIV transmission in sex work.

USAID also supports the Border Area HIV/AIDS Project, which is implemented by CARE International. The project conducts research and provides cross-border prevention and care services for people with HIV/AIDS and sexually transmitted infections in Koh Kong Province.

## **Policy**

In response to the recent approval from the U.S. Congress to work in closer coordination with the Government of Cambodia on HIV/AIDS, USAID partners have been more active in supporting the improvement in the multisectoral response to HIV/AIDS. Family Health International/IMPACT works closely with the National Center of HIV/AIDS, Dermatology and Sexually Transmitted Diseases to expand implementation of the Government of Cambodia's "100% Condom Use Policy" to six provinces. With Family Health International/IMPACT support, the Cambodian Ministry of National Defense completed its first five-year strategic plan to respond to HIV/AIDS in the military.

In addition, USAID's POLICY Project provides technical assistance to the National AIDS Authority in the development of their National HIV/AIDS Response Plan and assists the Ministry of Women's and Veteran's Affairs in its efforts to establish a Gender and HIV/AIDS Working Group. This group helps agencies include gender in their HIV/AIDS-related policies and programs. The POLICY Project helps to build the capacity of CPN+ (the newly formed national network, Cambodia People Living with AIDS); and provides technical support to Buddhist Monks to expand the role of faith-based organizations in HIV/AIDS prevention and care. Alongside CPN+, the POLICY Project successfully advocated for the passing of a progressive HIV/AIDS law at the national level in Cambodia. The law covers many aspects of the HIV/AIDS epidemic, including the mandatory involvement of all line ministries in preventing and mitigating the HIV epidemic, and provisions to prevent and disallow discrimination against people living with HIV/AIDS.

## **Prevention**

USAID supports several successful outreach interventions that target many subgroups currently at risk for HIV. Outreach programs for female commercial sex workers are concentrated in urban areas, where the majority of sex establishments are located. Other programs target men engaging in high-risk behaviors, such as those in military and police forces, with peer education. USAID also works to build the capacity of health care providers from government and nongovernmental organizations, specifically in the area of sexually transmitted infection case management and the provision of quality "sex worker-friendly" services.

## **IMPORTANT LINKS AND CONTACTS**

### **USAID/Cambodia**

Box P

APO AP 96546

Tel: 855-23-216-436, ext. 356

Fax: 855-23-427-638

USAID HIV/AIDS Web site, Cambodia:

[http://www.usaid.gov/pop\\_health/aids/countries/ane/cambodia.html](http://www.usaid.gov/pop_health/aids/countries/ane/cambodia.html)

*Prepared for USAID by TvT Global Health and Development Strategies /Social & Scientific Systems, Inc.,  
under The Synergy Project*

*For more information, see [www.usaid.gov/pop/aids](http://www.usaid.gov/pop/aids) or [www.synergyaids.com](http://www.synergyaids.com).*

**January 2003**

